



## D-40 Individual

Income Tax Return



Personal information			g an <b>amended retur</b> g for a deceased tax		OFFICIAL USE	
	Date of Birth (MMDDYYYY)		omestic partner's TIN			#0000
'our fi rst name	M.I. Last name					
pouse's/registered domestic partner's first name	M.I. Last name					
ome address (number, street and apartment num	per if applicable)					
ty		Sta	te Zip Code +	-4		
<u>iling status</u> Single, O	Married filing jointly,	Married filing separa	tely, Depend	ent claimed by som	neone else	
_	g separately on same return	1 Enter combined amou	nts for Lines 4–42.	See instructions.		
Registered do	omestic partners filingjointly	or or fi ling separ	ately on same retur	n		
	sehold Enter qualifying depe					
	dow(er) with dependent child					
	ident in DC from	(MMDD) to		instructions.		
Complete your federal <u>ncome Information</u>	return first – Enter yot	Round cents t	o nearest dollar. If amou	nt is zero, <u>l</u> eave line blan	ık;	
Wages, salaries, unemployment com	pensation and/or tips,	a \$	if minus, enter amount ar	nd fill in oval.	С	
Business income or loss, see instructio	ns. Fill in if los	ss b S		.00	С	
Capital gain (or loss).	Fill in if los			.00	С	
Rental real estate, royalties, partne				.00	С	
computation of DC Gross and Adjust	ad Cross Incomo					
Federal adjusted gross income. From Forms 1040, 1040A, 1040EZ, 1040NR, or	n adjusted gross income lines of	n federal Fill in if loss	O 3 \$			C
dditions to DC Income						
Franchise tax deducted on federal f	Orms, see instructions.		4 \$			0
Other additions from DC Schedule			5 \$			0
Add Lines 3, 4 and 5.	., calcalation .,c ci	Fill in if loss	6 \$			0
Subtractions from DC Income						
Part year residents, enter income r	eceived during period of	nonresidence see instru	uctions 7 \$			C
Taxable refunds, credits or offsets of			8 \$			C
<ul> <li>Taxable retaines, electrics of onsets of state and local medime tax.</li> <li>Taxable amount of social security and tier 1 railroad retirement</li> <li>From federal Forms 1040 or 1040A.</li> </ul>			9 \$			C
0 Income reported and taxed this year on a DC franchise or fiduciary return.			10 \$			C
						C
1 DC and federal government survivo	)r benefits see instructions		11 S			U U
-		16				
<ol> <li>DC and federal government survivo</li> <li>Other subtractions from DC Schedu</li> <li>Total subtractions from DC income</li> </ol>	ule I, Calculation B, Line	16.	11 \$ 12 \$ 13 \$			. C

D-40 PAGE 2		
Enter your last name		-
Enter your TIN		
15 Deduction type. Take the same type as you took on your federal return. Fill in which type:	_	
Standard or Itemized See instructions for amount to enter on Line 16.		
16 DC deduction amount. Do not copy from federal return. For amount to enter, see instructions.	16 \$	00
17 Number of exemptions. If more than 1, or if you or your spouse/registered domestic partner 17		
<ul> <li>are over 65 or blind, attach a completed Calculation G, Schedule S.</li> <li>18 Exemption amount. Multiply \$1,775 by number on Line 18. Part-year DC residents see instructions on page 25.</li> </ul>	18 \$	00
If federal AGI is greater than \$150,000, see instructions on page 27.		
19 Add Lines 16 and 18.	19 \$	00
20 DC taxable income. Subtract Line 19 from Line 14. Enter result.	20 \$	.00
DC tax, credits and payments		
21 Tax. If Line 20 is \$100,000 or less, use tax tables to find the tax, If more, use Calculation I in instructions. Fill in if filing separately on same return. @mplete Calculation J on Schedule S.	21 \$	.00
22 Credit for child and dependent care expenses. \$ .00 X .32 Enter result >	22 \$	.00
From federal form 2441; if part-year DC resident, from Line 5, DC Form 2441		00
23 Non-refundable credits from DC Schedule U, Part 1a, Line 8. Attach Schedule U.	23 \$	.00
24 DC Low Income Credit. Use Calc. LIC/EITC to see if LIC or EITC is a greater benefit. See instructions.	24 \$	00
24a Enter the number of exemptions claimed on your federal return if claiming LIC. 24a		0.0
25 Total non-refundable credits. Add Lines 22, 23 and 24.	25 \$	.00
26 Total Tax. Subtract Line 25 from Line 21. If Line 21 is less than Line 25 leave Line 26 blank.	26 \$	.00
27 DC Earned Income Tax Credit. Leave blank if you took Line 24 DC Low Income Credit (LIC).		
27a Enter the number of qualified EITC children. 27b Enter earned income amount.	27b\$	.00
27c For filers with qualifying children. Enter federal EIC \$ .00 X .40 Enter result >	27d\$	.00
	27e\$	.00
27e For filers without qualifying children. See instructions for special calculations.Enter result >28 Property Tax Credit. From your DC Schedule H; attach a copy.Enter result >	28 \$	.00
29 Refundable credits from DC Schedule U, Part 1b, Line 3. <i>Attach Schedule U.</i>	29 \$	.00
30 DC income tax withheld shown on Forms W-2 and 1099. Attach these forms.	30 \$	00
31 2017 estimated income tax payments and amount applied from 2016 return.	31 \$	.00
32 Tax paid with extension of time to file.	32 \$	00
33 Tax paid with original return if this is an amended return.	33 \$	.00
34 Total payments and refundable credits. <i>Add Lines 27d or 27e and 28 - 32.</i>	34 \$	00
	35 \$	00
35 Tax Due. Subtract Line 34 from Line 26.	36 \$	00
36 Amount overpaid. Subtract Line 26 from Line 34.	37 \$	00
37 Amount applied to your 2018 estimated tax.	38 \$	00
38 Underpayment Interest. Fill in the oval if Form D-2210 is attached.		00
39 Contribution amount from Schedule U, Part II, Line 5 or 6. (Can not exceed refund amount on Line 41)	39 \$	
40 Total Amount Due. Add Lines 35, 38 and 39.	40 \$	.00
41 Net Refund. Subtract total of Lines 37, 38 and 39 from Line 36.	41 \$	00
Will this refund go to an account outside the U.S.? Yes No See instructions.		
42 Fill in $\bigcirc$ if either spouse is claiming injured spouse protection.		
Refund Options: For information on the tax refund card and program limitations, see instructions or visit our	r website <u>MyTax.DC.gov</u> .	
Mark one refund choice: Direct deposit Reliacard Paper check		
Direct Deposit. To have your refund deposited to your checking OR savings account, fill in oval and enter bank Routing Number Account Number		
Third party designee To authorize another person to discuss this return with OTR, fill in here and enter the name and pho Designee's name Phone number	one number of that person. See instructions.	
Signature Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid pre-	eparer is based on information available to the preparer.	
Your signature Date Preparer's signature	Date	
Spouse's/domestic partner's signature if filing jointly or separately on same return Date Preparer's Tax Identification Number	r (PTIN) PTIN telephone number	